COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL031345 US

As a below named inventor, I hereby declare that:				
My residence, post office address and citizenship are as stated next to my name.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
the specification of which (check	k only one item below):			
is attached hereto.				
was filed as United States ap	oplication			
Serial No				
on			1	
and was amended				
on				
X was filed as PCT internation	al application			
Number PCT/IB2004/052283				
on 03 November 2004				
and was amended under PCT Article 19				
on (if applicable).				
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.				
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).				
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:				
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:				
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	03104226.0	17 November 2003	YES	
		U.S. DEPARTMENT OF COMMERCE	Patent and Trademarks Office	

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHNL031345 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222

	FULL NAME OF INVENTOR	FAMILY NAME TUYLS	FIRST GIVEN NAME	SECOND GIVEN NAME Theo
201	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OF FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP Belgium
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME SKORIC	FIRST GIVEN NAME Boris	SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME STALLINGA	FIRST GIVEN NAME Sjoerd	SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME OPHEY	FIRST GIVEN NAME Willem	SECOND GIVEN NAME Gerard
204	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME AKKERMANS	FIRST GIVEN NAME Antonius	SECOND GIVEN NAME Hermanus Maria
205	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Hoistlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME DE JONGH	FIRST GIVEN NAME Petra	SECOND GIVEN NAME Elisabeth
206	RESIDENCE & CITIZENSHIP	CITY Utrecht	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Postbus 80125	CITY 3508 TC Utrecht	STATE & ZIP CODE/COUNTRY The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
		Blece	Malinga
-	DATE 13 have 2005	DATE 13 June 2005	DATE 13 June 2005
•	SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
	445/		
	DATE 13 June 2005	DATE \13 kine 2005	DATE

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL031345 US

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		US DEPARTMENT OF COMMERCE	-Parent and Trademarks UTICE	

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Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245			Direct Telephone (name and teleph (914)332-022			
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FIRST GIVEN NAME

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Petra

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Postbus 80125

POST OFFICE ADDRESS

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CITY

Utrecht

FULL NAME OF

RESIDENCE &

CITIZENSHIP

POST OFFICE

INVENTOR

ADDRESS

206

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE 15 hime 2005
		3

SECOND GIVEN NAME

The Netherlands

The Netherlands

COUNTRY OF CITIZENSHIP

STATE & ZIP CODE/COUNTRY

Elisabeth

PTO/SB/80 (11-04)
Approved for use through 11/30/2005. OMB 0651-0035
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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).							
I hereby appoint:							
X Practi	X Practitioners associated with the Customer Number: 24737						
OR							
Practi	itioner(s) named	I below (if more than ten patent	practitioners a	re to be n	amed, then a custo	omer number m	ust be used):
	<u> </u>	Name	Registration Number		N	ame	Registration Number
				墓			
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			Feeder	灵			
any and all p	patent application	represent the undersigned before assigned only to the undersion of the undersion of the with 37 CFR 3.73(b).	ore the United igned according	States Pa g to the U	itent and Tradema ISPTO assignment	rk Office (USPT records or assi	O) in connection with ignment documents
Please char	nge the correspo	ondence address for the applica	tion identified	in the atta	ched statement un	der 37 CFR 3.7	73(b) to:
					· · · · · · · · · · · · · · · · · · ·		
X TI	ne address asso	ciated with Customer Number:		2473	7		
OR							
Fim	or ridual Name						
Address							
City State Zip							
Country							
Telephone					Fax		
Assignee N	Assignee Name and Address:						
KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg l							
5621 BA Eindhoven, The Netherlands							
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be							
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of							
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.							
SIGNATURE of Assignee of Record							
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature	/KL	Hade. He	aun			Date 14 C	January 2005
Name	Name Michael E. Marion Telephone (914) 333-963			914) 333-9637			
Title	Author	ized Representa	tive				

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

0/579152

PTO/SB/96 (08-03)
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STATEMENT UNDER # GERBARAGE 12 MAY 2006			
Applicant/Patent Owner: Koninklijke Philips Electronics N.V.			
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently		
Entitled: INFORMATION CARRIER COMPRISING A NO	N-CLONABLE OPTICAL IDENTIFIER		
Koninklijke Philips Electronics N.V. , a (Name of Assignee)	corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)		
states that it is: 1.	, or		
2. an assignee of less than the entire right, title and The extent (by percentage) of its ownership inter in the patent application/patent identified above by virtue.	est is%		
A. [/] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.			
OR			
B. [] A chain of title from the inventor(s), of the patent below:	application/patent identified above, to the current assignee as shown		
From: ————————————————————————————————————			
2. From:	To:		
The document was recorded in the United Reel, Frame	States Patent and Trademark Office at, or for which a copy thereof is attached.		
From:			
[] Additional documents in the chain of title are listed on a supplemental sheet.			
[] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (<i>i.e.</i> , the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]			
The undersigned (whose title is supplied below) is auti	norized to act on behalf of the assignee.		
5.4.06	Michael E. Belk, Reg. 33,357		
Date	Typed or printed name Mulael RBell		
(914) 333-9643 Telephone number	Signature		
Total Control Control	Corporate Counsel		
	Title		

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.